

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 03/31/03.

## **I. DISPUTE**

Whether there should be reimbursement for CPT code 97265 for dates of service 04/11/02 through 07/16/02.

## **II. RATIONALE**

The date of service 07/11/02 CPT code 97265 was denied as "F-Reduction according to Fee Guideline. Exceeds the limitations of the Physical Medicine Ground Rules. According to MFG MGR (I)(10)(a) the requestor has exceeded the four modalities allowed. Therefore, reimbursement in the amount of \$43.00 is not recommended.

The date of service 04/11/02 was denied "L-Not Treating Doctor." The employee's request to change treating doctors was not approved until 04/16/02. Therefore, based solely on this evidence reimbursement is not recommended for this date of service.

The requestor billed the respondent \$903.00 for CPT code 97265 for the dates of service 04/18/02 through 07/16/02. The carrier made no reimbursement and denied services as "G-Included in Global Fee. The value of this service is included in the value of another service billed on the same date of service." The MFG MGR does not indicate CPT code 97265 is global to any of the other services provided for on these same dates of service. CPT code 97265 is listed as separate code in the MFG MGR and is not subject to a global denial. Therefore, reimbursement is recommended in the amount of **\$860.00**.

## **III. DECISION & ORDER**

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement for CPT codes 97265. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby **ORDERS** the Respondent to remit **\$860.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 11th day of January 2004.

Michael Bucklin  
Medical Dispute Resolution Officer  
Medical Review Division  
MB/mb